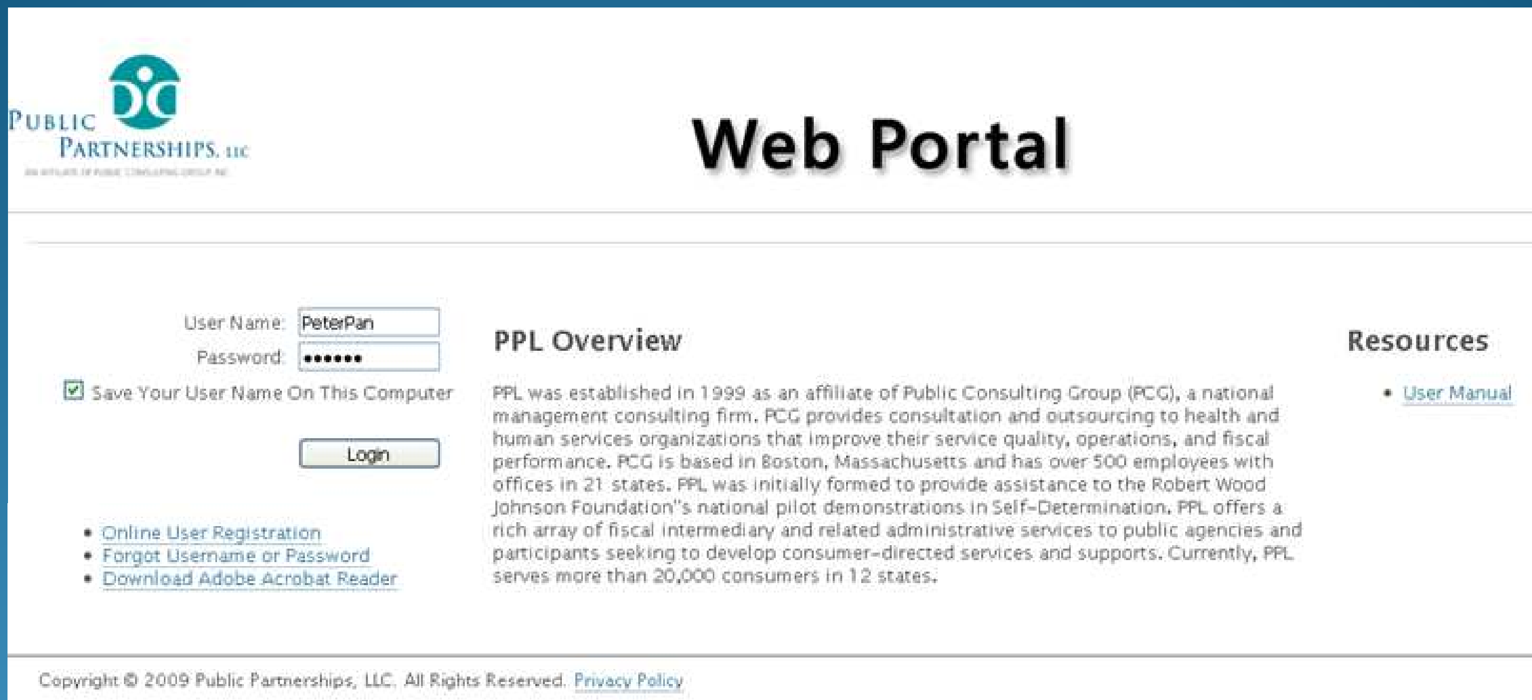
# VA Community Living PPL Web Portal User manual

# Logging in




Enter your username and password to log in

# Public Partnerships Web Portal

## Program and Role Selector

You have access to more than one program. Please select a program and role you want to use.

Program: VA AAA BAY Program

- VA AAA BAY Program
- VA AAA JABA Program
- VA AAA VPAS Program

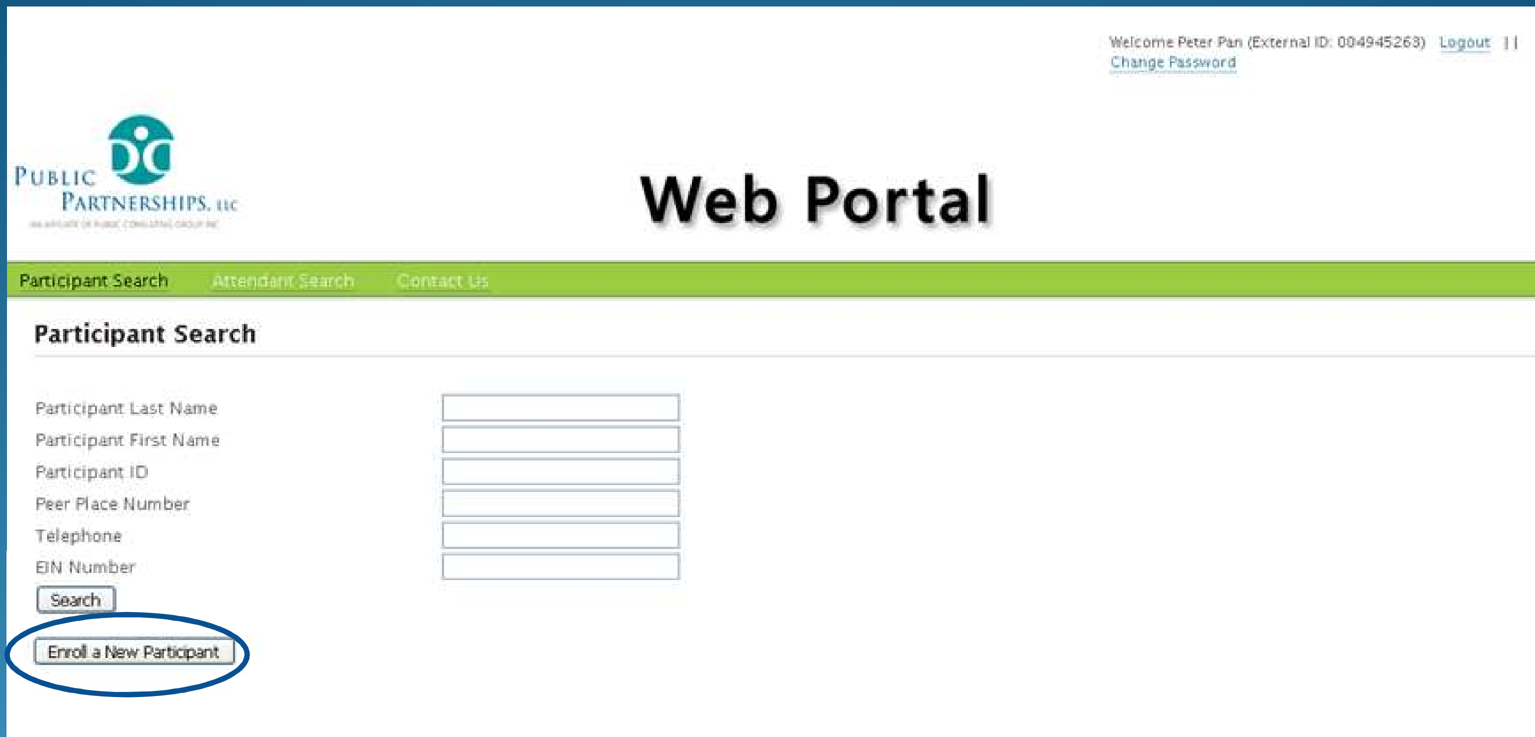
Role: Support Coordinator VA AAA

Go



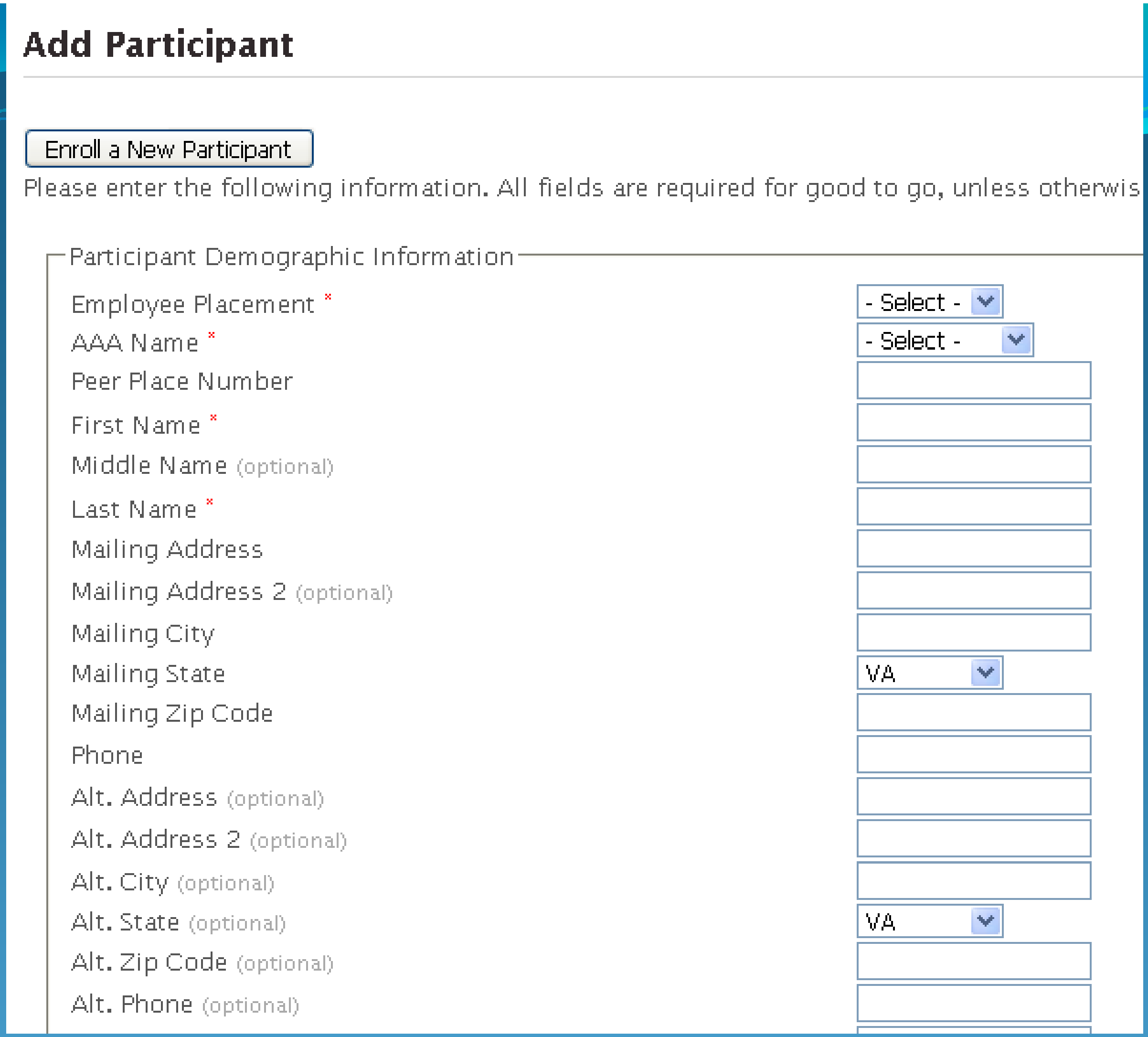
Select the Agency you work for, from the drop down list. Click “Go” to continue

# Participant Enrollment




Once you have logged in, you will be brought to the Participant Search page. Enter your participant's information to search for the person. You may enter information into one or more search fields. You may also click Search without entering anything in the search Fields and the search will return all Participants associated with your Agency.

If you would like to enroll a new participant, click the button on the bottom of the screen. We recommend searching for the participant first in case the information has already been entered.



## Add Participant

Enroll a New Participant

Please enter the following information. All fields are required for good to go, unless otherwis

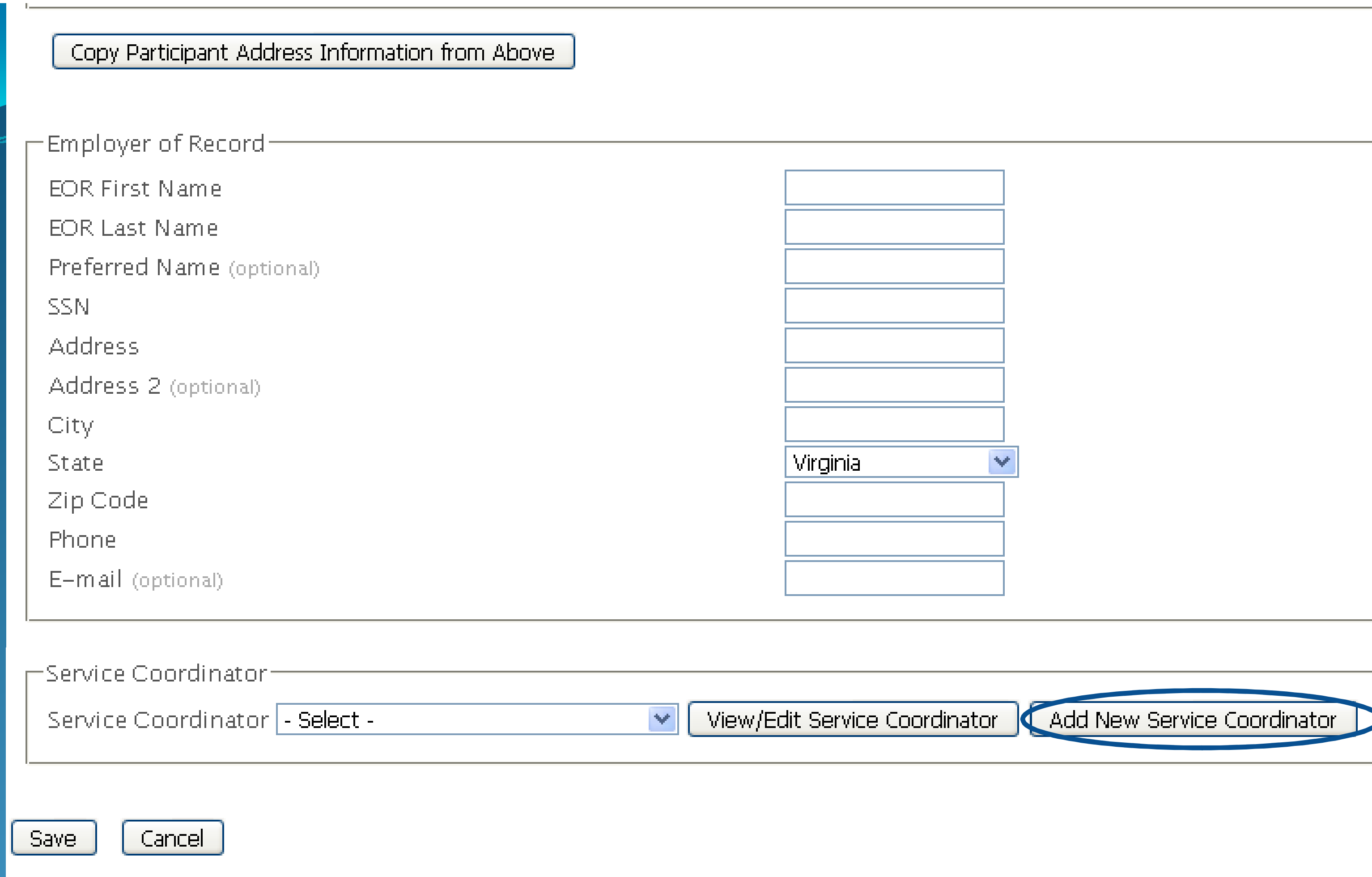
Participant Demographic Information

| | |
|---|---|
| Employee Placement * | - Select - |
| AAA Name * | - Select - |
| Peer Place Number | |
| First Name * | |
| Middle Name (optional) | |
| Last Name * | |
| Mailing Address | |
| Mailing Address 2 (optional) | |
| Mailing City | |
| Mailing State | VA |
| Mailing Zip Code | |
| Phone | |
| Alt. Address (optional) | |
| Alt. Address 2 (optional) | |
| Alt. City (optional) | |
| Alt. State (optional) | VA |
| Alt. Zip Code (optional) | |
| Alt. Phone (optional) | |

Enter the participant's demographic information here. You must enter the AAA name (your agency's name) and chose a Yes or No in the Employee Placement field. Yes means participant will be hiring his/her own employees. No means all services will be sought through the AAA.

Continued on next page…

PPL Admin use only

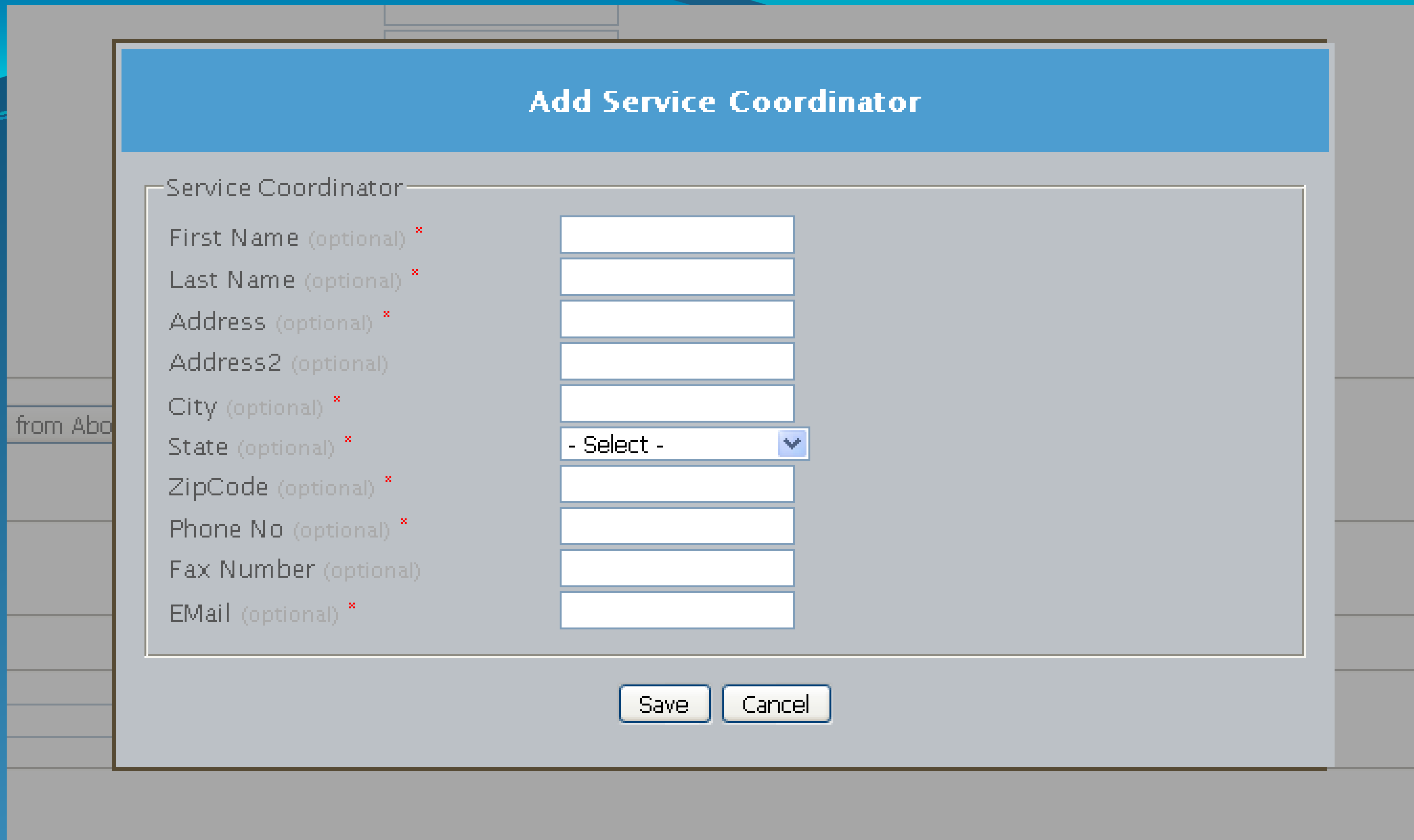



PPL Admin use only

When participant has employee placement, participant will be set up as an Employer by PPL. In some cases the Employer Of Record (EOR) will be someone other than the participant. Regardless, EOR information must be filled out even if the participant is also an EOR.

Please associate the participant to a Service Coordinator at the bottom of the screen

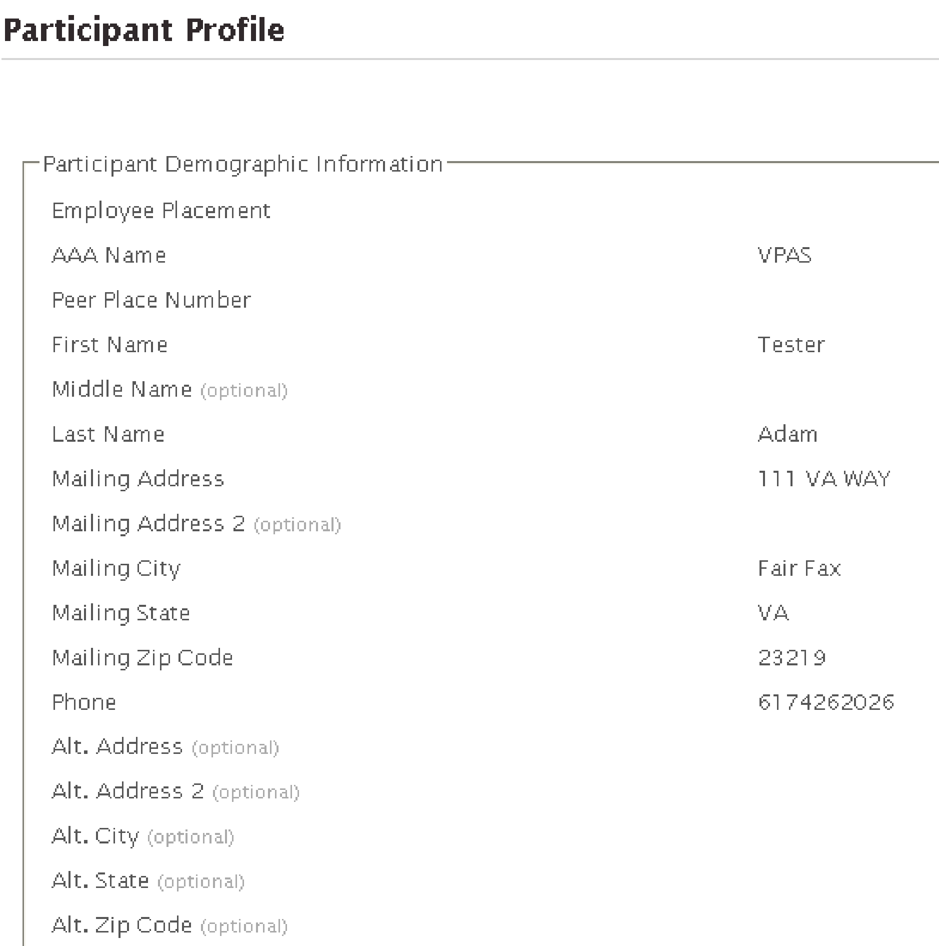
PPL Admin use only




PPL Admin use only

If you've clicked on Add Service Coordinator, (SC) please fill out the information asked for in this screen. This information is what PPL will use to contact the appropriate SC if there is a question about a particular participant.

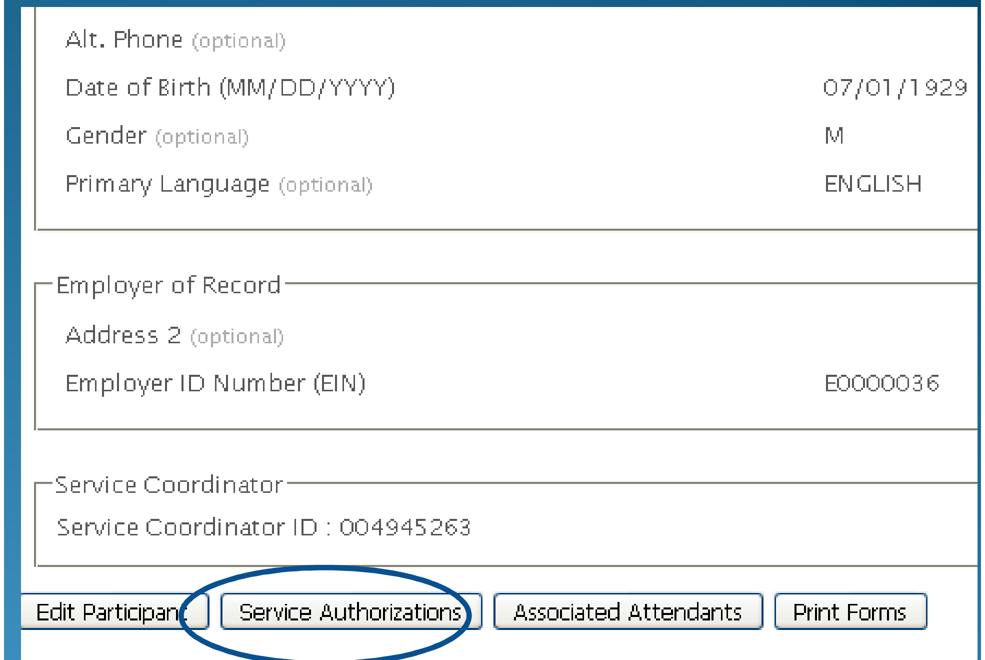
# Authorizing budgets and services



## Participant Profile

Participant Demographic Information

| | |
|---|---|
| Employee Placement | |
| AAA Name | VPAS |
| Peer Place Number | |
| First Name | Tester |
| Middle Name (optional) | |
| Last Name | Adam |
| Mailing Address | 111 VA WAY |
| Mailing Address 2 (optional) | |
| Mailing City | Fair Fax |
| Mailing State | VA |
| Mailing Zip Code | 23219 |
| Phone | 6174262026 |
| Alt. Address (optional) | |
| Alt. Address 2 (optional) | |
| Alt. City (optional) | |
| Alt. State (optional) | |
| Alt. Zip Code (optional) | |



| | |
|---|---|
| Alt. Phone (optional) | |
| Date of Birth (MM/DD/YYYY) | 07/01/1929 |
| Gender (optional) | M |
| Primary Language (optional) | ENGLISH |

Employer of Record

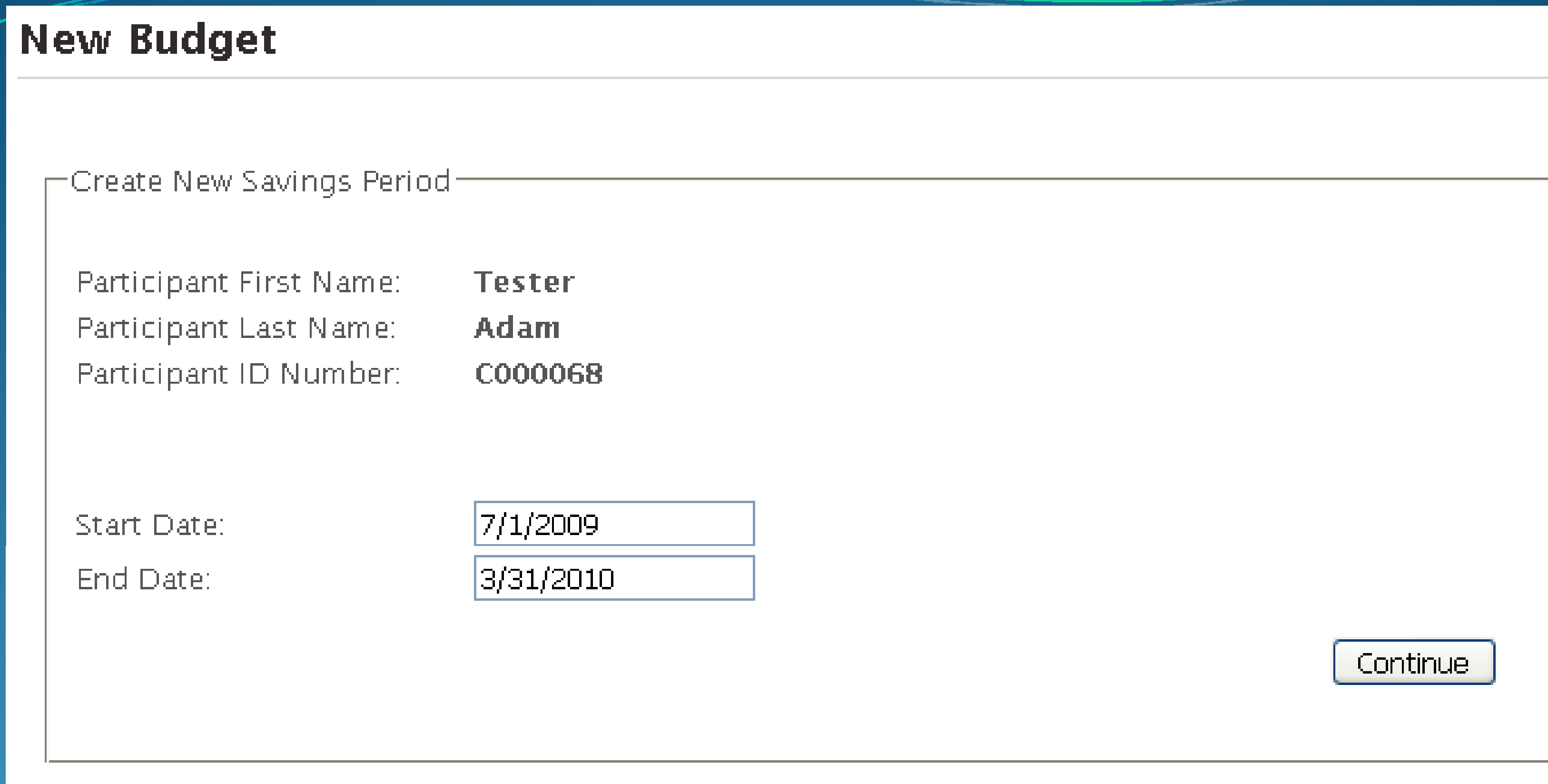
| | |
|---|---|
| Address 2 (optional) | |
| Employer ID Number (EIN) | E0000036 |

Service Coordinator

Service Coordinator ID : 004945263

Edit Participant | Service Authorizations | Associated Attendants | Print Forms

Go back to the Participant Profile and click on Service Authorizations to enter the participant's budget and service authorizations.




The first thing you will be asked to do is to enter the new “savings period”. All unused authorized funds will be pooled into the “savings budget” for later use to cover past-due timesheets and invoices, as well as purchases over $1200/month limit, when appropriate.

The savings period should always begin on 7/1/2009 and end on 3/31/2010 for this program.

Click Continue to proceed to budget creation screens

## Budgets For Tester Adam (ID#C000068)

**Savings Period:** 7/1/2009 - 3/31/2010 [New Savings Period]

| | | | |
|---|---|---|---|
| Total Budget: | $0.00 | Current Savings Amount: | $0.00 |
| Total Allocated: | $0.00 | Current Savings Allocated: | $0.00 |
| Total Spent: | $0.00 | Current Savings Spent: | $0.00 |
| Total Balance: | $0.00 | Current Savings Balance: | $0.00 |

### *Monthly Budgets:*

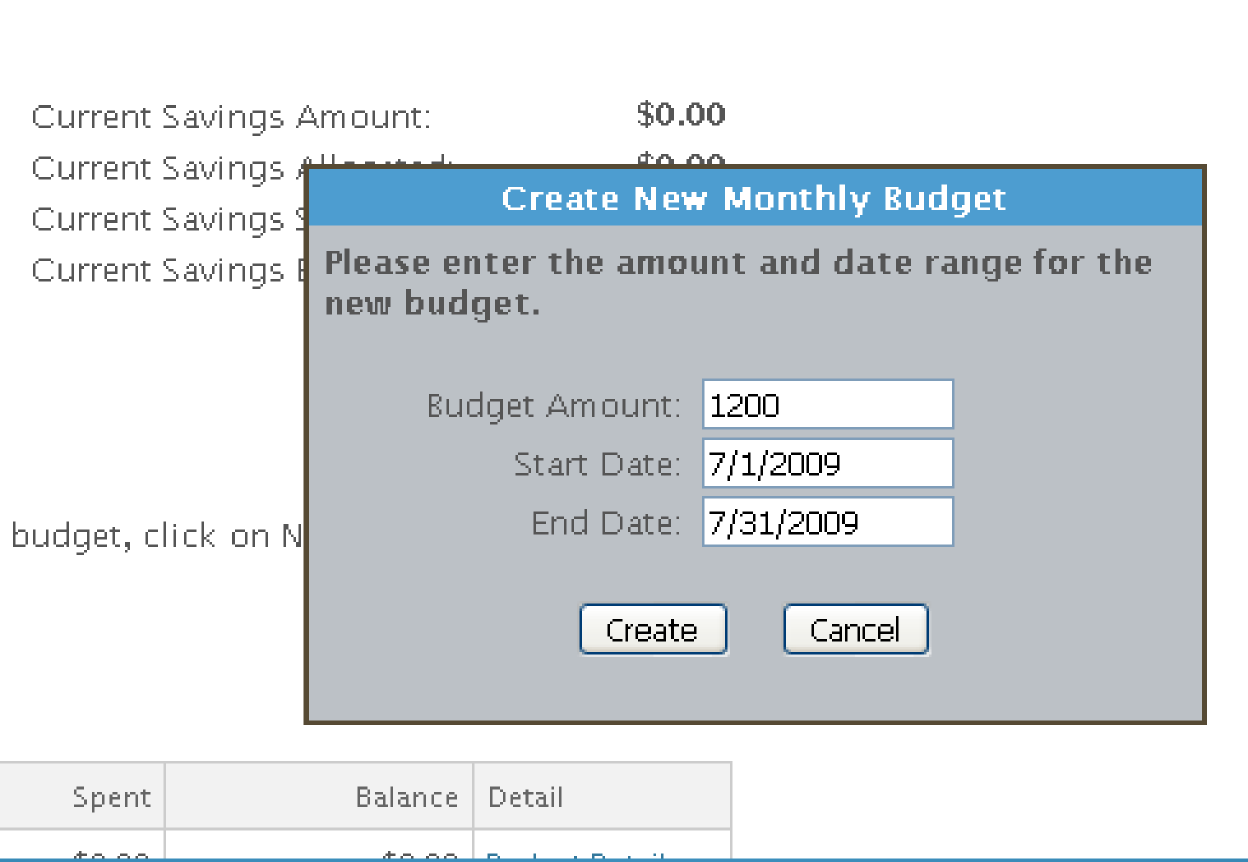
You do not have any Monthly Budgets. To create a budget, click on New Budget button below

### *Savings Budget:*

| Budget Id | Amount | Allocated | Spent | Balance | Detail |
|---|---|---|---|---|---|
| 2510000 | $0.00 | $0.00 | $0.00 | $0.00 | Budget Detail |

[New Budget] [Back to Participant Profile]

Click on New Budget to create the new monthly budget for the participant. This is where you can authorize how much money the participant may spend in a month.




The maximum amount that you can authorize per month is $1,200, per rules of the program. The budgets must begin and end within the same month (so if the begin date is in September, the end date must also be in September). Unused funds in the budget will be swept into the Savings Budget 45 days after the end of the budget month. Attendants and Agencies are instructed to submit all timesheets and invoices for that month by that date.

Once the budget entry is completed, click Create to proceed to set up service authorizations.

## Budgets For Tester Adam (ID#C000068)

**Savings Period:** 7/1/2009 - 3/31/2010 New Savings Period

| | | | |
|---|---|---|---|
| Total Budget: | $1,200.00 | Current Savings Amount: | $0.00 |
| Total Allocated: | $0.00 | Current Savings Allocated: | $0.00 |
| Total Spent: | $0.00 | Current Savings Spent: | $0.00 |
| Total Balance: | $0.00 | Current Savings Balance: | $0.00 |

Budget successfully created.

### *Monthly Budgets:*

| Budget Id | Start | End | Amount | Allocated | Spent | Balance | Detail | Action |
|---|---|---|---|---|---|---|---|---|
| 2520000 | 7/1/2009 | 7/31/2009 | $1,200.00 | $0.00 | $0.00 | $0.00 | Budget Detail | |

To authorize services to be purchased with the budgeted funds, click on Budget Detail.

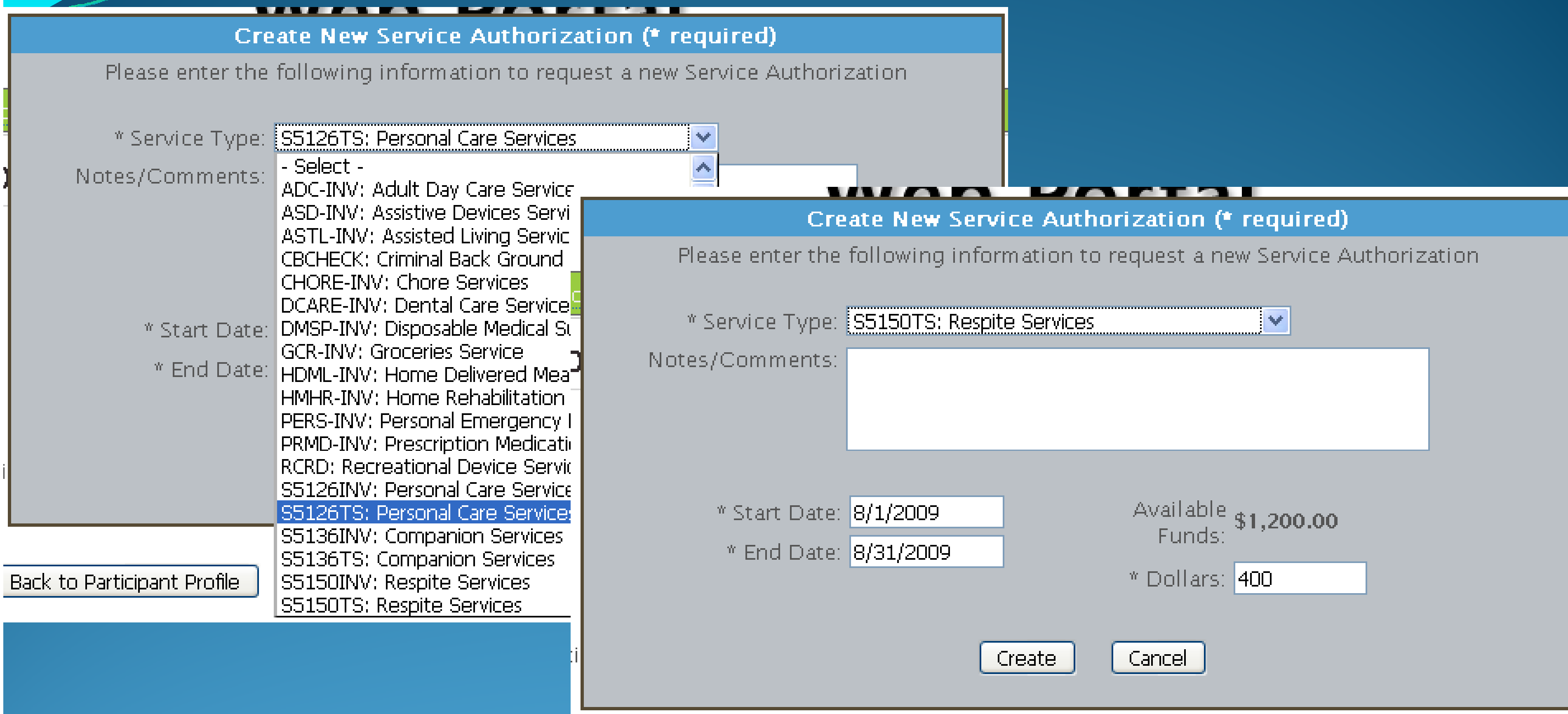
## Budget Detail For Tester Adam (ID#C000068)

| | | | | | |
|---|---|---|---|---|---|
| Budget: | $1,200.00 | | | | |
| Total Allocated Funds: | $0.00 | Total Authorizations: | $0.00 | Start Date: | 7/1/2009 |
| Total Unallocated Funds: | $1,200.00 | Total Spent: | $0.00 | End Date: | 7/31/2009 |
| | | Total Balance: | $0.00 | | |

There are no Service Authorizations for this Participant.

New Service Authorization | Back to Budgets | Back to Participant Profile

Click “New Service Authorization” on this screen to proceed.




Create the services the participant is authorized to received and the appropriate dollar amount you are authorizing for each service.

The list of available and program approved services is available in the drop down menu.

## Budget Detail For Tester Adam (ID#C000068)

| | | | | | |
|---|---|---|---|---|---|
| Budget: | $1,200.00 | | | | |
| Total Allocated Funds: | $400.00 | Total Authorizations: | $400.00 | Start Date: | 7/1/2009 |
| Total Unallocated Funds: | $800.00 | Total Spent: | $0.00 | End Date: | 7/31/2009 |
| | | Total Balance: | $400.00 | | |

Your Service Authorization Request was approved.

| Service | Attendant | Start Date | End Date | Line Total | Paid | Invoiced | Balance | Note | Status | Action |
|---|---|---|---|---|---|---|---|---|---|---|
| S5126TS: Personal Care Services | | 7/1/2009 | 7/31/2009 | $400.00 | $0.00 | $0.00 | $400.00 | Personal care independent provider | Approved | |
| Total: | | | | $400.00 | $0.00 | $0.00 | $400.00 | | | |

New Service Authorization | Back to Budgets | Back to Participant Profile

detail

edit

delete

Once you have created the authorization line, you may use the buttons on the right of the screen to view detail, edit, or delete the line. You will not be able to delete the line once services are billed against it. You also will not be allowed to edit the dollar amount to less that what has been billed against the authorization to date.

## Budget Detail For Tester Adam (ID#C000068)

| | |
|---|---|
| Budget: | $1,200.00 |

| | | | | | |
|---|---|---|---|---|---|
| Total Allocated Funds: | $1,150.00 | Total Authorizations: | $1,150.00 | Start Date: | 7/1/2009 |
| Total Unallocated Funds: | $50.00 | Total Spent: | $0.00 | End Date: | 7/31/2009 |
| | | Total Balance: | $1,150.00 | | |

Your Service Authorization Request was approved.

| Service | Attendant | Start Date | End Date | Line Total | Paid | Invoiced | Balance | Note | Status | Action |
|---|---|---|---|---|---|---|---|---|---|---|
| CBCHECK: Criminal Back Ground Check | | 7/1/2009 | 7/31/2009 | $50.00 | $0.00 | $0.00 | $50.00 | | Approved | |
| RCRD: Recreational Device Service | | 7/1/2009 | 7/31/2009 | $300.00 | $0.00 | $0.00 | $300.00 | | Approved | |
| S5126TS: Personal Care Services | | 7/1/2009 | 7/31/2009 | $400.00 | $0.00 | $0.00 | $400.00 | Personal care independent provider | Approved | |
| S5150INV: Respite Services | | 7/1/2009 | 7/31/2009 | $400.00 | $0.00 | $0.00 | $400.00 | | Approved | |
| Total: | | | | $1,150.00 | $0.00 | $0.00 | $1,150.00 | | | |

New Service Authorization | Back to Budgets | Back to Participant Profile

Once you have created all of the service authorizations for the month, you click Back to Budgets to return to the Budget detail screen.

## Budgets For Tester Adam (ID#C000068)

**Savings Period:** 7/1/2009 - 3/31/2010 [New Savings Period]

| | | | |
|---|---|---|---|
| Total Budget: | **$1,200.00** | Current Savings Amount: | **$0.00** |
| Total Allocated: | **$1,150.00** | Current Savings Allocated: | **$0.00** |
| Total Spent: | **$0.00** | Current Savings Spent: | **$0.00** |
| Total Balance: | **$1,150.00** | Current Savings Balance: | **$0.00** |

### *Monthly Budgets:*

| Budget Id | Start | End | Amount | Allocated | Spent | Balance | Detail | Action |
|---|---|---|---|---|---|---|---|---|
| 2520000 | 7/1/2009 | 7/31/2009 | $1,200.00 | $1,150.00 | $0.00 | $1,150.00 | Budget Detail | |

Copy Budget

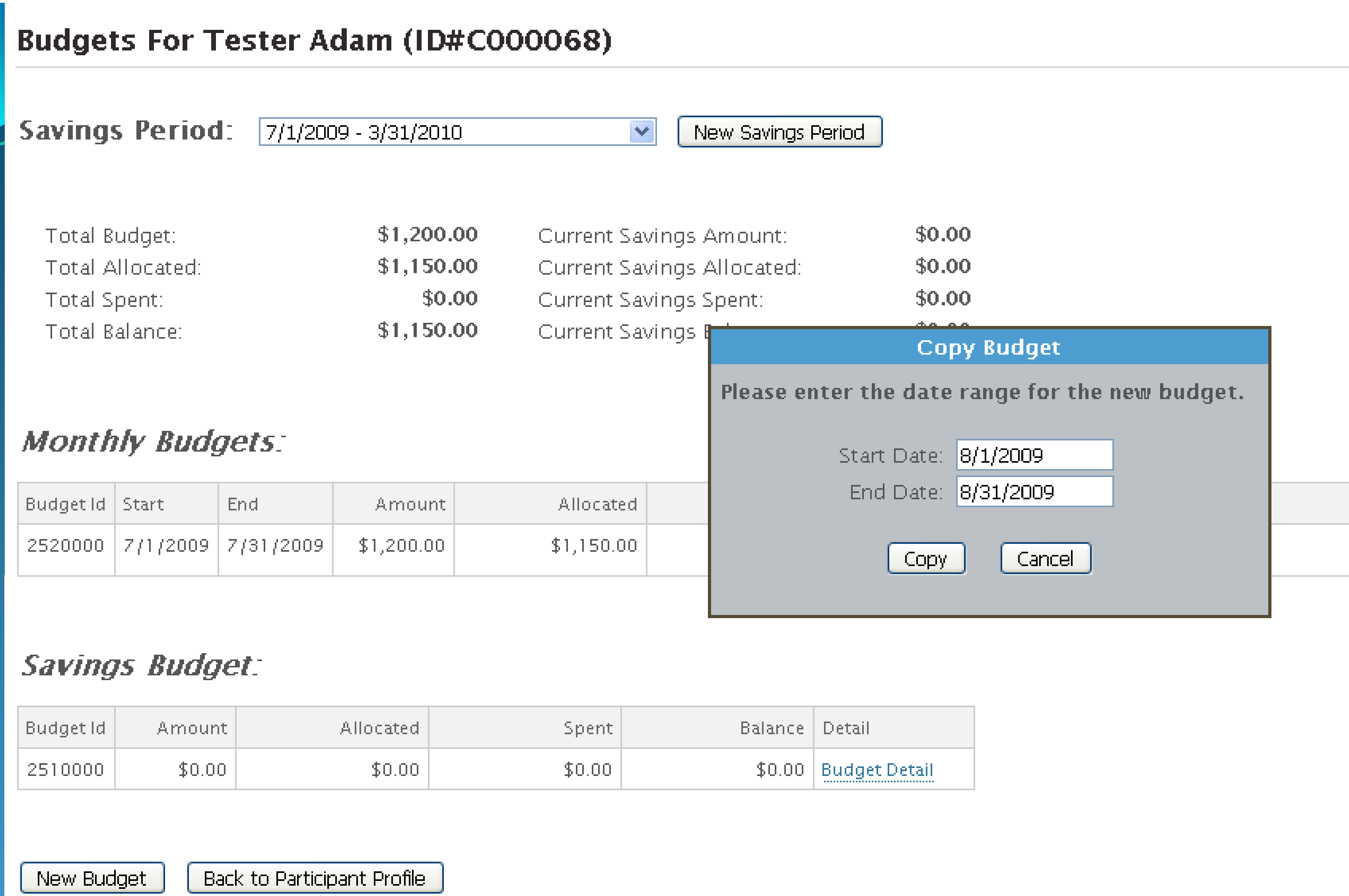
Edit Line

### *Savings Budget:*

| Budget Id | Amount | Allocated | Spent | Balance | Detail |
|---|---|---|---|---|---|
| 2510000 | $0.00 | $0.00 | $0.00 | $0.00 | Budget Detail |

[New Budget] [Back to Participant Profile]

You can see now that the budget detail screen reflects the authorizations you just set up in the budget. You can copy the month's budget for the following month if you'd like.




Once you click "copy budget" button, you will be asked to enter the date range for the next budget. Again, the budget must begin and end within the same calendar month. After entering the date range for the new budget, click Copy to copy the budget.

**Budget Period:** 1/1/2009 - 9/30/2009

| | | | |
|---|---|---|---|
| Total Budget: | $3,420.00 | Current Savings Amount: | $802.00 |
| Total Authorized: | $2,060.00 | Current Savings Authorized: | $0.00 |
| Total Spent: | $0.00 | Current Savings Spent: | $0.00 |
| Total Balance: | $2,060.00 | Current Savings Balance: | $0.00 |

***Monthly Budgets:***

| Budget Id | Start | End | Amount | Allocated | Spent | Balance | Detail | Action |
|---|---|---|---|---|---|---|---|---|
| 50000 | 1/1/2009 | 4/1/2009 | 420 | $420.00 | $0.00 | $420.00 | Budget Detail | |
| 130000 | 4/2/2009 | 4/30/2009 | $1,000.00 | $400.00 | $0.00 | $400.00 | Budget Detail | |
| 180000 | 8/1/2009 | 8/31/2009 | $1,000.00 | $520.00 | $0.00 | $520.00 | Budget Detail | |
| 170000 | 9/1/2009 | 9/30/2009 | $1,000.00 | $720.00 | $0.00 | $720.00 | Budget Detail | |

If you clicked on “Edit Line”, you will see the option to edit budget amount. You can then click the icon to accept the budget change.
You can also click on Budget Detail to see detailed information about the budget and usage to date.

## Budget Detail For Tester Adam (ID#C000043)

| | |
|---|---|
| Budget: | $420.00 |

| | | | | | |
|---|---|---|---|---|---|
| Total Allocated Funds: | $420.00 | Total Authorizations: | $420.00 | Start Date: | 1/1/2009 |
| Total Unallocated Funds: | $0.00 | Total Spent: | $0.00 | End Date: | 4/1/2009 |
| | | Total Balance: | $420.00 | | |

| Service | Attendant | Start Date | End Date | Line Total | Paid | Invoiced | Balance | Note | Status | Action |
|---|---|---|---|---|---|---|---|---|---|---|
| CBCHECK: Criminal Back Ground Check | | 1/1/2009 | 4/1/2009 | $20.00 | $0.00 | $0.00 | $20.00 | | Inactive | |
| S5136TS: Companion Services | | 1/1/2009 | 4/1/2009 | $200.00 | $0.00 | $0.00 | $200.00 | | Inactive | |
| S5150TS: Respite Services | | 1/1/2009 | 4/1/2009 | $200.00 | $0.00 | $0.00 | $200.00 | | Inactive | |
| Total: | | | | $420.00 | $0.00 | $0.00 | $420.00 | | | |

See Details

Edit Line

Delete Line

New Service Authorization | Back to Budgets | Back to Participant Profile

On the Budget Detail screen, you can edit the authorization lines, delete them, or see details of the authorization. Click on See Details to look at spending against the authorization, balance, and authorization revisions.

## Service Authorization Detail

Service Authorization ID: AUL0000336

**Consumer Name:** Fullcycle Test
**Consumer ID:** 9988778899887788
**Medicaid ID:**
**Vendor Name:**
**Service Type:** Personal Care Services
**Referral Status:** Approved

**Begin Date:** 7/1/2009
**End Date:** 7/31/2009
**Rate:** $8.12
**Unit Type:** HOUR
**Units:** 49.26
**Total Amount :** $400.00

**Notes:**

**Total Invoiced:** $255.30 Hide Detail

| Id | Provider | Service | Service Date | Units | Pay Rate | Billable Rate | Line Amount |
|---|---|---|---|---|---|---|---|
| VA0000427587 | First Fullcycle | S5126TS: Personal Care Services | 07/02/09 | 23.00 | 10 | $11.10 | $255.30 |

**Total Paid:** $0.00

**Total Balance:** $144.70

**Revision History:** Hide Revision

| Start Date | End Date | Rate | Amount | Status | Created By | Created Date | Modified By | Modified Date |
|---|---|---|---|---|---|---|---|---|
| 07/01/09 | 07/31/09 | $8.12 | $400.00 | Approved | vaaaatestadmin | 09/16/09 10:24 AM | vaaaatestadmin | 09/16/09 10:24 AM |

Back

Service Authorization Detail screen lists payments made for the authorized service, balance remaining, as well as any authorization revisions, when applicable.

# Printing Employer Packet forms

## Participant Profile

Participant Demographic Information

| | |
|---|---|
| Employee Placement | |
| AAA Name | VPAS |
| Peer Place Number | |
| First Name | Tester |
| Middle Name (optional) | |
| Last Name | Adam |
| Mailing Address | 111 VA WAY |
| Mailing Address 2 (optional) | |
| Mailing City | Fair Fax |
| Mailing State | VA |
| Mailing Zip Code | 23219 |
| Phone | 6174262026 |
| Alt. Address (optional) | |
| Alt. Address 2 (optional) | |
| Alt. City (optional) | |
| Alt. State (optional) | |
| Alt. Zip Code (optional) | |

| | |
|---|---|
| Alt. Phone (optional) | |
| Date of Birth (MM/DD/YYYY) | 07/01/1929 |
| Gender (optional) | M |
| Primary Language (optional) | ENGLISH |

Employer of Record

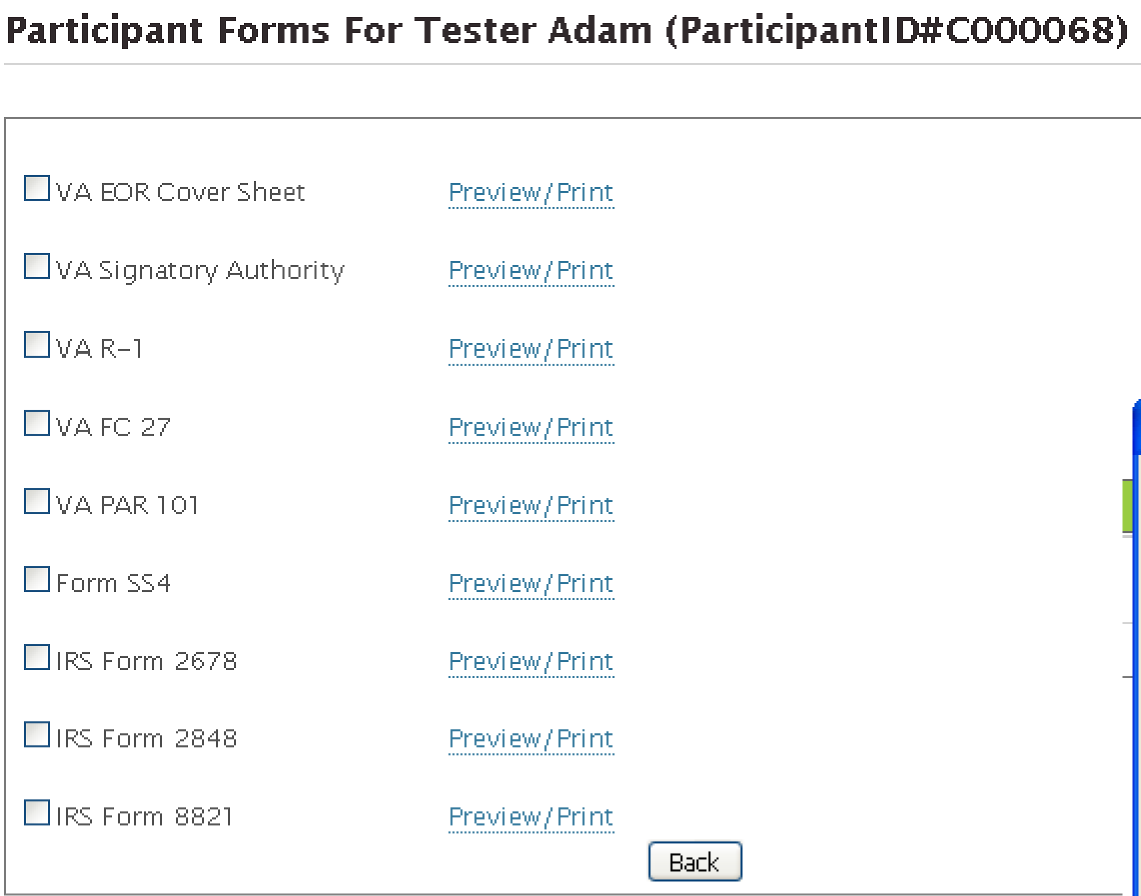
| | |
|---|---|
| Address 2 (optional) | |
| Employer ID Number (EIN) | E0000036 |

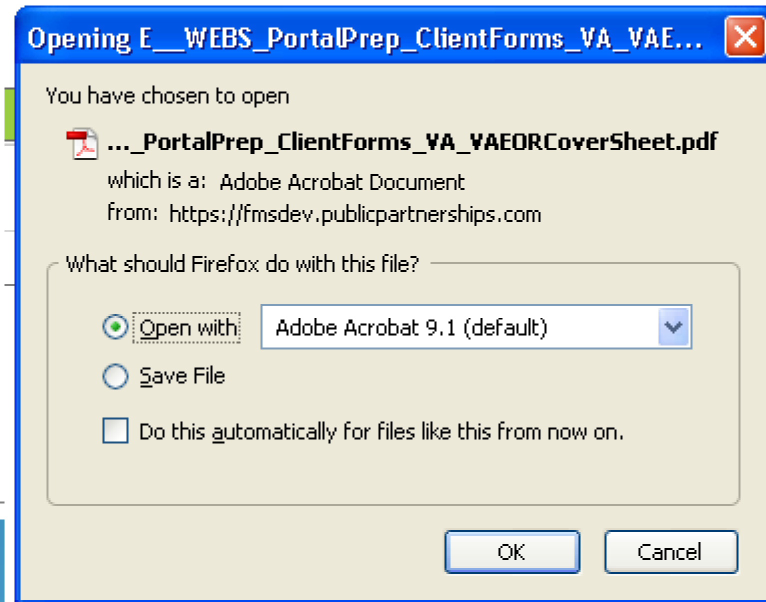
Service Coordinator

Service Coordinator ID : 004945263

Edit Participant | Service Authorizations | Associated Attendants | Print Forms

Back on the Participant Profile screen, you can click on “Print Forms” to access EOR packet forms. These are pre-populated and available for when the participant decides s/he will hire employees. Once the forms are signed by the participant, you or the participant will mail the forms to PPL for processing. PPL will then obtain a Federal Employer Identification Number from the government and the participant will be able to hire employees.




You may save the forms and email them to the participant, or print them to be mailed by regular mail. PPL must receive the packet in its entirety, with original signatures.

# Associating Attendants

## Participant Search

Participant Last Name

Participant First Name

Participant ID

Peer Place Number

Telephone

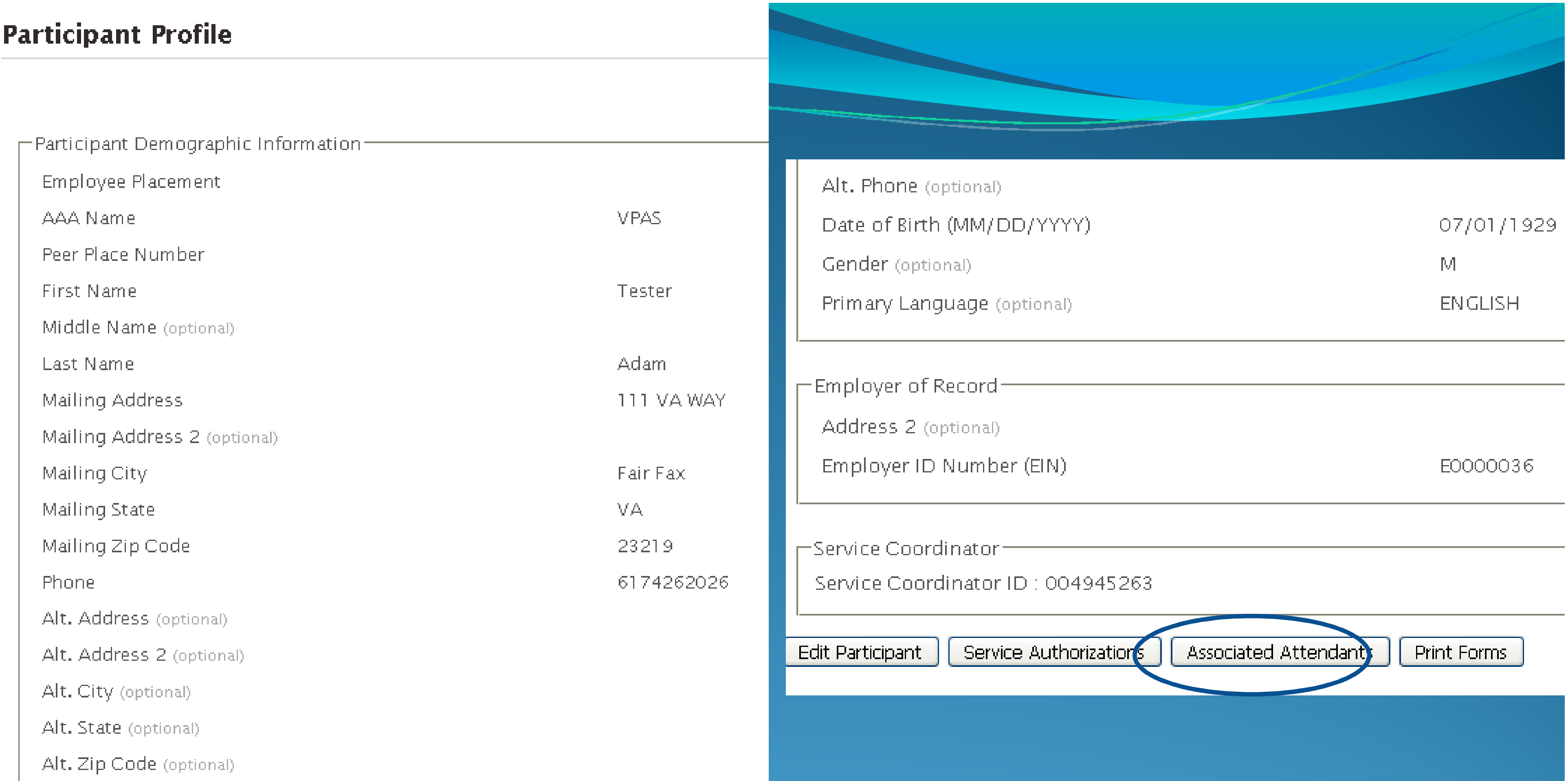
EIN Number

Search

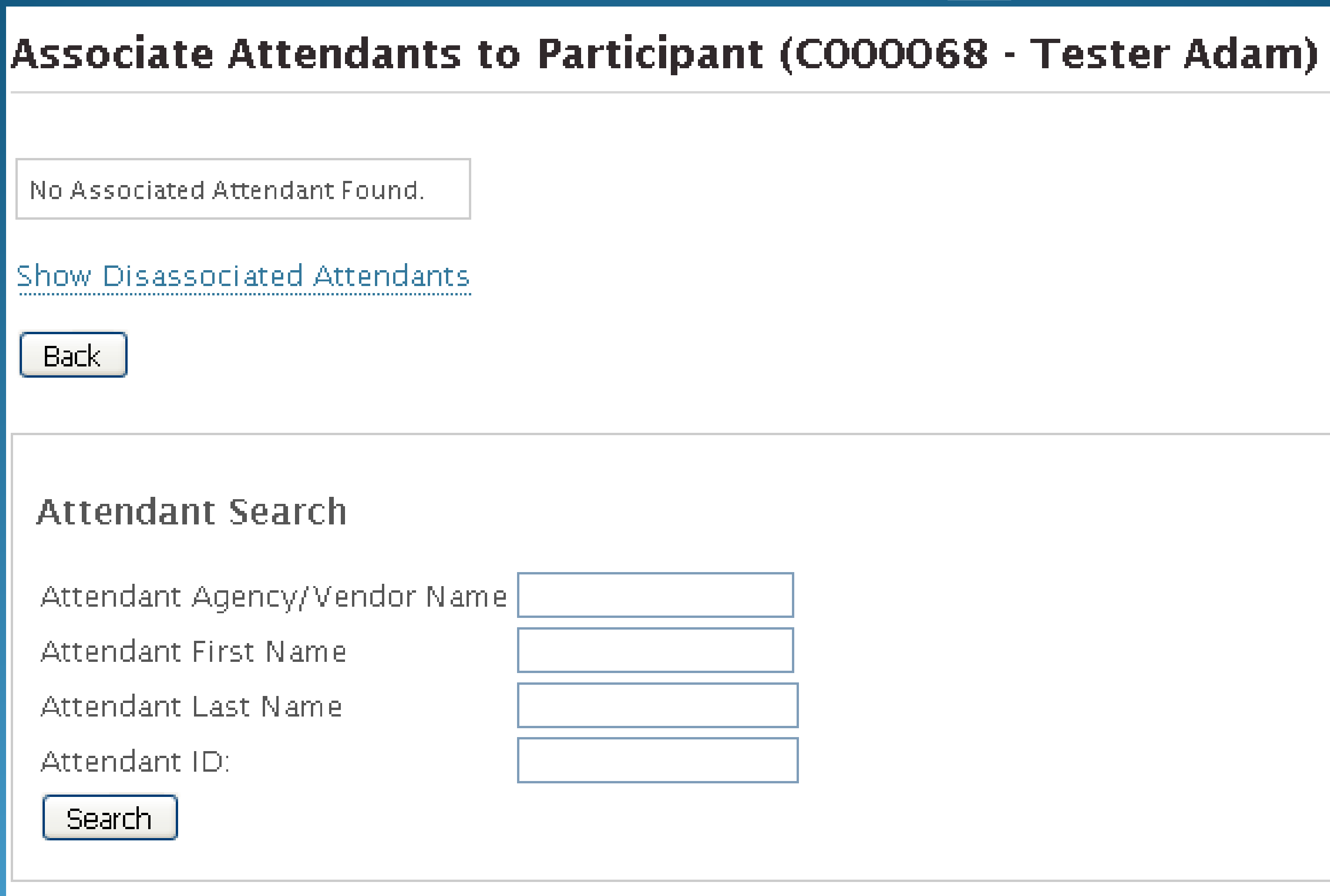
Enroll a New Participant

| Participant | Participant ID | Peer Place Number | Birth Date | Good To Serve | EmployerNo | Phone | Participant Profile | Authorizations |
|---|---|---|---|---|---|---|---|---|
| ADAM, TESTER | C000068 | | 07/01/1929 | No | E0000036 | 6174262026 | Participant Profile | Authorizations |
| EPPARD, JANE | C000109 | | 11/11/1927 | No | E0000086 | 540 298-2283 | Participant Profile | Authorizations |
| KING, CLEVELAND | C000105 | 1233321456998413 | 02/28/1961 | Yes | E0000082 | 8047373848 | Participant Profile | Authorizations |
| LONG, VDA | C000107 | | 11/20/1921 | No | E0000084 | | Participant Profile | Authorizations |
| MARKS, VDA | C000076 | | 11/11/1926 | No | E0000053 | 540-568-1212 | Participant Profile | Authorizations |
| MERICA, ROBERT | C000110 | | 03/03/1933 | No | E0000087 | 540-298-3456 | Participant Profile | Authorizations |
| RICHARDSON, VDA | C000075 | | 09/12/1931 | No | E0000052 | 5404341027 | Participant Profile | Authorizations |
| SHIFFLETT, JOSEPH | C000108 | | 11/15/1937 | No | E0000085 | 540-289-1111 | Participant Profile | Authorizations |

Go back to the Participant Search screen, and look for the participant you just added. You can now click on Participant Profile to add attendants, print EOR packet forms, edit information, and create service authorizations.




Once in the Participant Profile, click on Associated Attendants to add attendants who will be working for the participant.




The attendant search screen is similar to the participant search screen. Look for the attendant you need to associate to the participant.

## Attendant Search

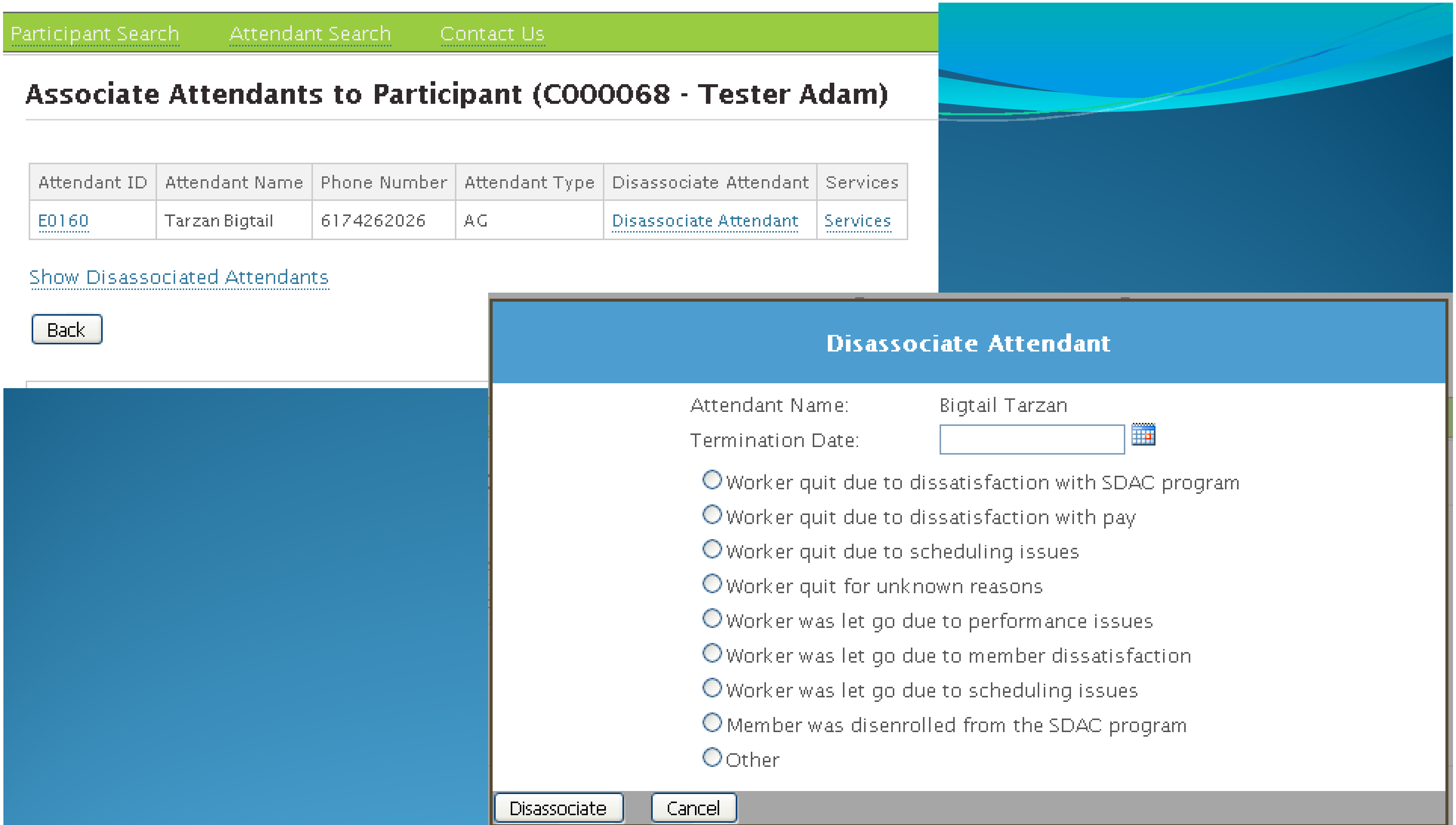
| | |
|---|---|
| Attendant Agency/Vendor Name | * |
| Attendant First Name | |
| Attendant Last Name | |
| Attendant ID: | |

Search

Your search found 16 record(s). Click the Attendant Name to associate the Attendant.

| Attendant Name | Attendant ID | Service Type |
|---|---|---|
| Tarzan Bigtail | E0160 | Adult Day Care Service, Assistive Devices Service, Assisted Living Service, Chore Services, Personal Care Services, Companion Services, Respite Services |
| asdsa | E0170 | Assistive Devices Service, Chore Services, Companion Services, Respite Services, Transportation Service |
| test | E0190 | Recreational Device Service, Transportation Service |

Once you have located the attendant you were looking for, click on the attendant's name to complete the association.


Participant Search | Attendant Search | Contact Us

## Associate Attendants to Participant (C000068 - Tester Adam)

| Attendant ID | Attendant Name | Phone Number | Attendant Type | Disassociate Attendant | Services |
|---|---|---|---|---|---|
| E0160 | Tarzan Bigtail | 6174262026 | AG | Disassociate Attendant | Services |

Show Disassociated Attendants

Back

### Disassociate Attendant

Attendant Name: Bigtail Tarzan

Termination Date:

- Worker quit due to dissatisfaction with SDAC program
- Worker quit due to dissatisfaction with pay
- Worker quit due to scheduling issues
- Worker quit for unknown reasons
- Worker was let go due to performance issues
- Worker was let go due to member dissatisfaction
- Worker was let go due to scheduling issues
- Member was disenrolled from the SDAC program
- Other

Disassociate | Cancel

Similarly, you may disassociate attendants, by clicking on the Disassociate Attendant button. In the screen that pops up you will be asked for a reason for the disassociation. Only associated attendants will be able to submit timesheets for a participant they are employed by.

Click on Services to specify which services the attendant will be performing.

**Participant Attendant Services**

Services

| | Service Name | Service Description | Service Code | Maximum Rate | Desired Rate | Rates Count |
|---|---|---|---|---|---|---|
| ☐ | Adult Day Care Service | Adult Day Care Service for Agency Providers | ADC-INV | As Negotiated | $0.00 | Rates [ 0 ] |
| ☐ | Assisted Living Service | Assisted Living Service for Agency Providers | ASTL-INV | As Negotiated | $0.00 | Rates [ 0 ] |
| ☐ | Assistive Devices Service | Assistive Devices Service for Agency Providers | ASD-INV | As Negotiated | $0.00 | Rates [ 0 ] |
| ☐ | Chore Services | Chore Services for Agency Providers | CHORE-INV | As Negotiated | $0.00 | Rates [ 0 ] |
| ☐ | Companion Services | Companion Services for Independent Providers | S5136TS | $17.92 | $0.00 | Rates [ 0 ] |
| ☐ | Personal Care Services | Personal Care Services for Independent Providers | S5126TS | $17.92 | $0.00 | Rates [ 0 ] |
| ☐ | Respite Services | Respite Services for Independent Providers | S5150TS | $20.16 | $0.00 | Rates [ 0 ] |

Save Close

**Add/Update Employee Service Rates**

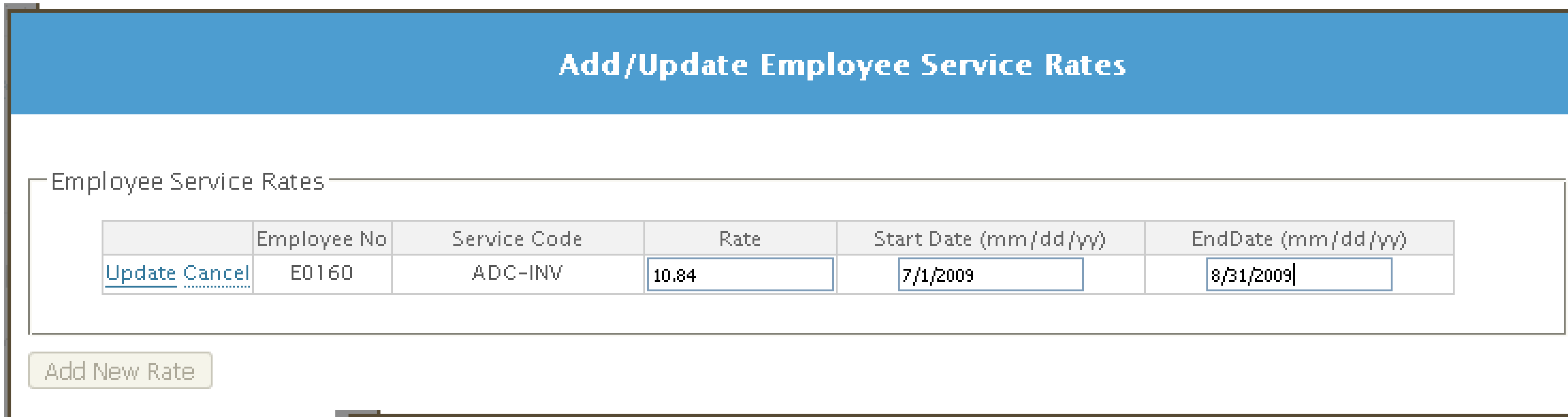
This Provider has No Services Rates to display

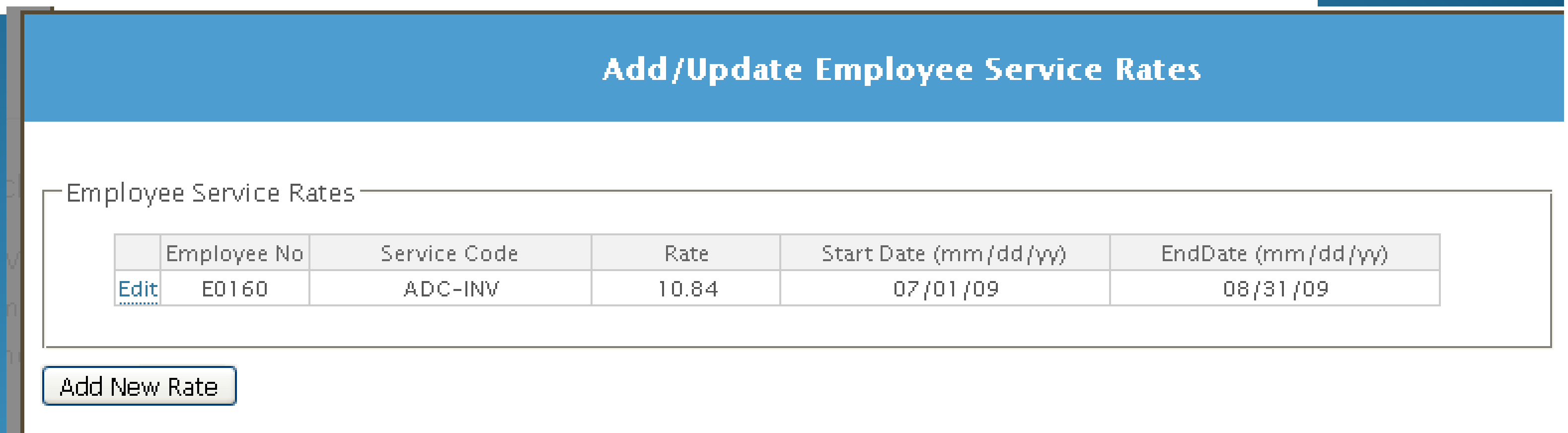
Add New Rate

Choose the services that the attendant will be performing. Independent providers will only be able to submit timesheets for the following services: S5136TS, S5126TS, S5150TS. All other services are for agencies only.

Once the services are selected, click on Rates to specify the pay rate at which this attendant was hired by this participant. Attendants may be hired by different participants at different pay rates.

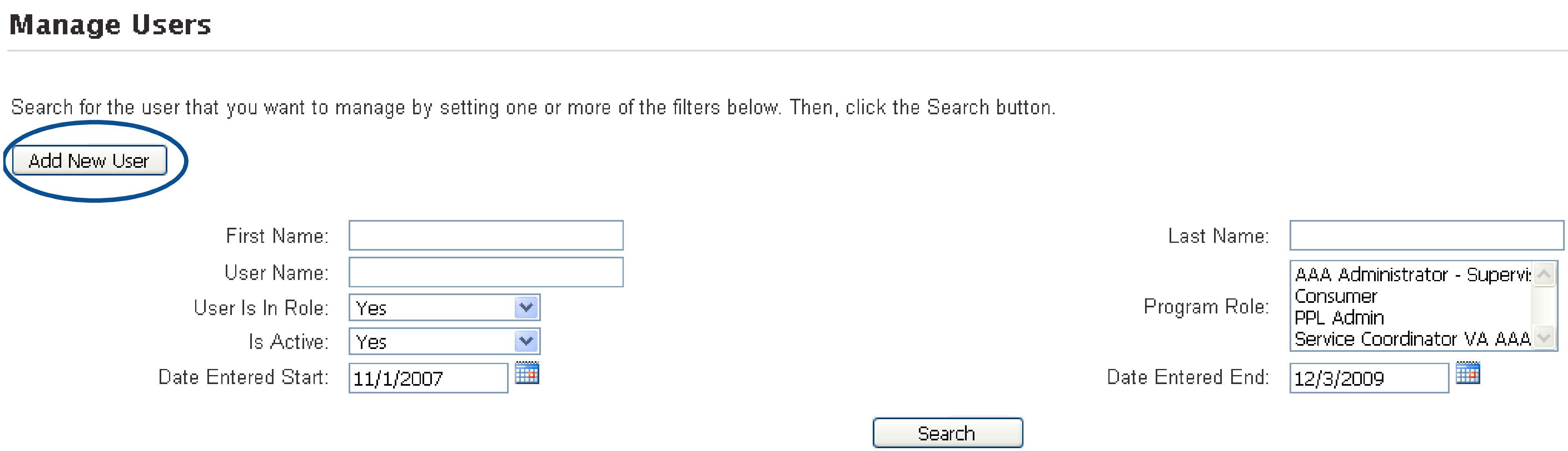
Click on Add New Rate to continue.



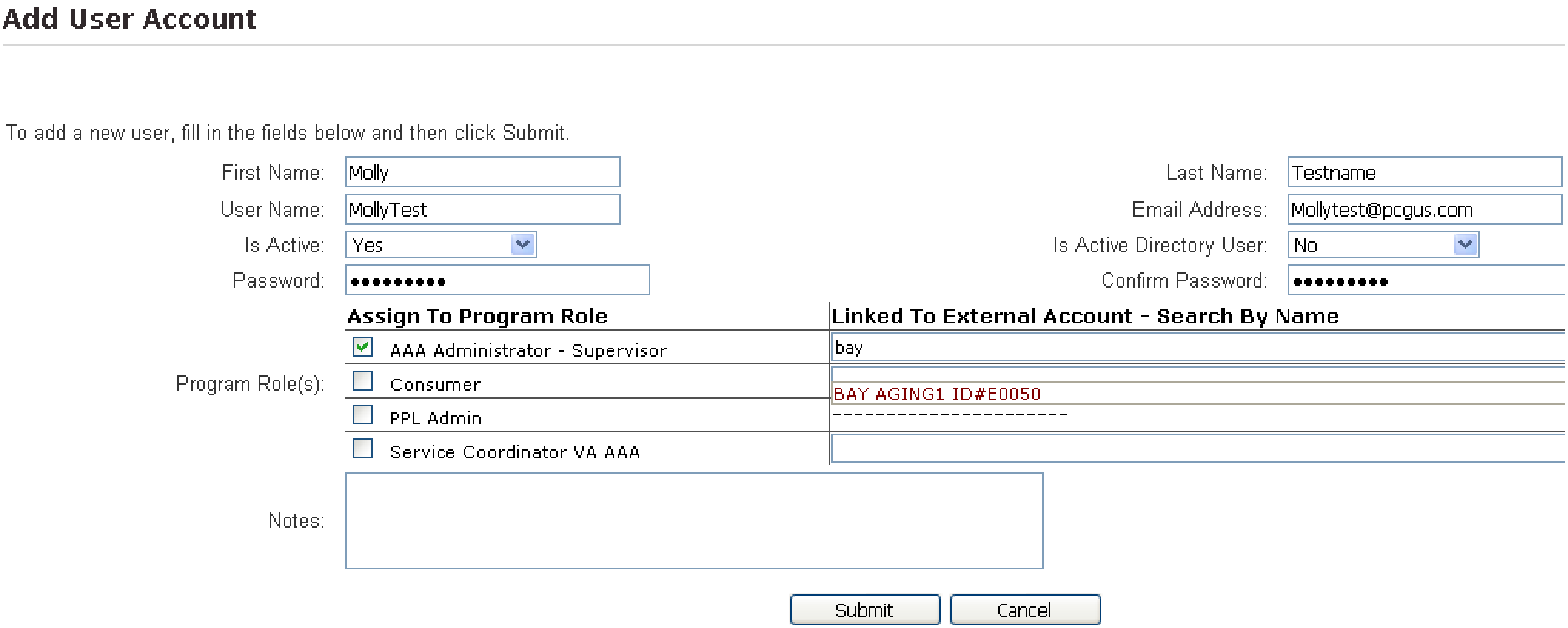




Enter the pay rate and the time period for which the rate is valid. This can be edited in the future. You may enter multiple rates for different time periods, if a pay increase was negotiated by the attendant at the time of hire.

# User Management




The User Management module can be used for creating new users, as well as managing existing users. To add a new user, click the “Add New User” button.




Enter the individual’s First name, Last name, desired username, email address, and password. Passwords should be at least 8 characters in length, and contain at least 1 upper case letter, 1 number, and one special character (!@#$%^&*)

Check off the correct box under “Assign to Program Role” and start typing the person’s name or Agency name under “Linked to External Account”. The name table will populate and you will be able to select the correct individual from the list that will appear below. Click Submit when finished.

**User Account Added**

The user account was successfully added to the system.

You have now successfully created a new user account. Please test it yourself before giving it to the individual who will be using it. You can test it by going back to the log in page, and logging in with the user ID and password you have just created.